

March 1998

Clinical Center News

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Collaboration with Duke offers new training option

An academic collaboration between the School of Medicine at North Carolina's Duke University and the NIH Clinical Center will offer students here a chance to earn a master's degree in clinical research while taking advantage of hands-on research opportunities at NIH.

Duke's training program is designed for clinical fellows and other health professionals who are training for academic careers. The curriculum covers the principles of clinical research, focusing on

research design, statistical and decision analysis, research ethics, and project management along with research experience with a mentor. The program, which includes 24 units of course work and a 12-unit research and thesis project, leads to a Master of Health Sciences in Clinical Research.

Beginning in September, students at the CC can participate in an experiment in long-distance learning—by video conference—in classes presented at Duke.

Some of the program's courses will be presented here at NIH by adjunct faculty.

"The collaboration is designed primarily for NIH clinical fellows and the medical students who participate in the NIH training program in clinical research," explained Dr. John Gallin, CC director. "They can now earn a master's degree while they are here."

"We're excited about the

See **new program**, page two

Bioethics chief puts education at the top of program's agenda

Having recently taken over the helm of the CC bioethics department full-time, Dr. Ezekiel Emanuel plans to make education a priority.

"There are a number of wonderful opportunities for educational programs in bioethics here at the Clinical Center," said Emanuel. "I plan to use programs such as CC grand rounds to introduce ethical issues."

The first of such programs, "DNR in the OR," will be offered on March 4 from noon to 1 p.m. in Lipsett Amphitheater.

Emanuel, who recently completed 18 months of service with the President's National Bioethics

Advisory Commission, had served as a senior consultant for clinical bioethics here at the CC. Previous posts include a stint as assistant professor of medicine and associate professor of social medicine and of clinical epidemiology at the Dana-Farber Cancer Institute at Harvard.

Upcoming plans for the department include reforming consultation services involving difficult ethical issues and addressing issues relating to human subjects and health policy.

"I hope to establish a major research and educational presence in bioethics here at the CC," said Emanuel.



Dr. Ezekiel Emanuel has taken over the CC Department of Bioethics full time.

Reports put clinical research in the spotlight

by Dr. John Gallin
CC director

As the revitalization of the Clinical Center literally surrounds us with the evidence of construction, two pivotal reports concerning clinical research at NIH provide a framework that will likely help shape the future of the work that will be carried out here.

One report, prepared by the NIH Director's Panel on Clinical Research, includes discussions of the role of our hospital and the issues of recruitment and training of future clinical researchers.

The charge to the panel made by Dr. Harold Varmus, NIH director, was to review clinical research in this country and recommend how best to continue it.

Dr. David G. Nathan, president of the prestigious Dana-Farber Cancer Institute in Boston, chaired this panel, which examined the issues affecting clinical research.

In presenting its findings, the panel stressed the necessity for top-flight outfitting and operation of our current facility and the new Hatfield Clinical Research Center. The report's charge to us is to ensure the environment necessary for the nation's cutting-edge clinical research.

Other recommendations by the

panel serve to strengthen our commitment to developing new options for training clinical investigators. Education in how to perform clinical research has all too often depended on a medical student's access to a willing mentor. Today's research and medical education needs are too complex for that to be the only route to develop the pertinent skills and insights.

Our Core Course in Clinical Research was established to introduce researchers to the principles and practice of clinical research. Beginning in September, NIH clinical fellows and medical students participating in the NIH Clinical Research Training Program will have the opportunity to enroll in a program leading to a Master of Health Sciences in Clinical Research offered here at the CC by Duke University. (See related story on page one of *CCNews*.)

We will continue to explore and expand opportunities such as these.

The NIH Director's Panel endorsed the findings of another report released earlier in 1997.

Dr. Stephen Straus, chief of NIAID's laboratory of clinical investigation, chaired this effort to examine clinical research, focusing on trends in NIH clinical research programs and training, as well as the recruitment and employment issues clinical researchers face.

Dr. Michael Gottesman, NIH deputy director for intramural research, and I will use the information and recommendations in the committee's report to strengthen and rejuvenate clinical research and

clinical services.

As Dr. Straus's report notes, the Clinical Center's labs and clinics form a unique research environment and that clinical research is "one of the NIH's most important, successful, and visible missions."

Our challenge is to merge the physical expansion of the Clinical Center with unprecedented clinical research opportunities and a growing infrastructure of education, training, and support for the clinical investigator.

... collaboration offers new program

(Continued from page one)

collaboration," said Dr. William Wilkinson, director of the Duke program, which began in 1986, "and this is our first step in making the program more widely available to distant learners. Ours was one of the first training programs in clinical research in the U.S. and we've had 11 years to refine and improve it."

He added, "Formal course work in the quantitative and methodological foundations of clinical research is an essential component of a high-quality program, because fellows typically don't get this training anywhere else."

For more information about the program, call Dr. Wilkinson at (919) 681-4561 or send him an e-mail at wilki016@mc.duke.edu.

Clinical Center
News

Editor: LaTonya Kittles

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Social workers speak at women's summit

Stephanie Miller and Judith Williams, CC social workers, were guest speakers at a women's summit last month. "Women of Color and Allies Summit: Linking Arms in Dangerous Times" was designed for participants to create a framework that will ensure the values, vision, and inclusion of women of color in the feminist movement. More than 300 people attended the conference, which was sponsored by the National Organization for Women.

Training offered

The education and training section of the Office of Human Resources Management will offer a seminar, "Excellence in Customer Service," on March 26 from 9 a.m. to 4 p.m. at 6100 Executive Boulevard. Discussions will include: the dos and don'ts for managing the angry customer, how cultural differences play a role in your customer interactions, and ways to provide "knock-your-socks-off" customer service.

Nutrition classes slated for this month

Join the CC dietetic interns as they present two classes during National Nutrition Month. The first class, "Size it Up: Increasing Your Awareness of How Much You Eat," will be held on March 6. The second class, "Get Moving: Controlling Your Weight With an Active Lifestyle," is set for March 13. Both classes will be presented from 12:30 p.m. to 1:00 p.m. in the Little Theatre.

Spring craft fair approaching

The Friends of the Clinical Center will host a spring craft fair in the Visitor Information Center on

CC activities mark Children and Healthcare Week

This month, the CC will celebrate the 19th annual observance of Children and Healthcare Week.

This year's theme, "Access to Excellence," will offer participants the opportunity to learn more about what constitutes quality pediatric health care and what barriers must be bridged to ensure access to such care.

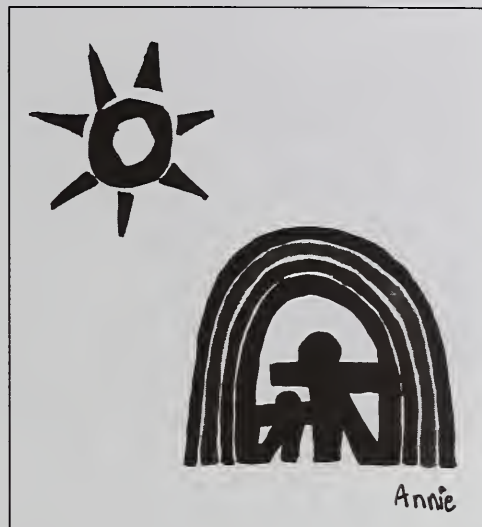
The program includes:

- March 13 through March 22, pediatrics poster exhibit, outside the special events office (1C174);
- Monday, March 16, multi-institute pediatric unit's Open House, 2 p.m. to 4 p.m., 9 West and 11 East;
- Tuesday, March 17, St. Patrick's Day Party, 2 p.m. to 3:30 p.m., 14th floor assembly hall; and

Wednesday, April 8 from 10 a.m. to 3 p.m. This year's exhibitors include: potters, weavers, dried-flower arrangers, glass and jewelry makers, woodcrafters, knitters, and seamstresses. A raffle is also on tap. Tickets will be sold outside the B1 cafeteria on April 6, 7, and 8. Proceeds from the fair will benefit CC patients and their families with special needs.

Social worker published

Fred Boykin, CC social worker, recently had several chapters published in "HIV and Social Work: A Practitioner's Guide." The book, written specifically by and for social workers, details skills necessary to help and support individuals with HIV and those who love and care for them. In his chapters, Boykin discusses



•Wednesday, March 18, Children's Medical Play Clinic, 2 p.m. to 3:30 p.m., 11 East Day Hospital.

This annual event is sponsored by the Association for the Care of Children's Health. For more information on these programs, call Kristin Johnsen at 6-0147.

helping a person with HIV/AIDS enter a clinical trial, as well as preparing a power of attorney and living will.

Awards honor CC employees

Several CC employees and volunteers were recently recognized by the NIH quality of work life committee for their commitment to improving the quality of work life at the CC. Contributions included helping employees balance work and family lives, volunteering with the Friends of the Clinical Center, and contributing to the physical fitness of staff. Honorees included: Carol Romano, Laura Chisholm, Jerry King, Kai Lakeman, Al Rexroad, Marcia Smith, Floride Canter, and Jan Weymouth.

Ice storms earlier this year bypassed the Washington area, but devastated parts of the northeastern U.S. CC nurses were among emergency workers answering the call for help.



CC nurses help during ice-storm emergency

During the “Season of Giving,” two Clinical Center nurses gave much more than gifts to the needy. Susan Orsega and Leslie Stephens gave themselves.

Both are CC nurse case managers in the 8th floor clinic and Commissioned Corps officers in the

Public Health Service (PHS). They were deployed to upstate New York to assist during ice storms that had resulted in numerous deaths, and partially paralyzed the northeast in early January.

Their specialized training with the USPHS National Disaster

Medical System (NDMS) helped to prepare them for their mission of providing care for individuals during times of emergencies and natural disasters, but no training could prepare them for what they saw when they arrived.

“The whole area looked like a battlefield,” said LCDR Leslie Stephens.

During her assignment, Stephens traveled approximately fifty miles every day from Ft. Drum to Cape Vincent, to visit shelters and provide care for the residents, many of whom were elderly.

Using four-wheel drive vehicles to maneuver the ice-ridden and tree-lined roads, the team of four, including a physician, a Commissioned Corps nurse, and two emergency medical technicians, roughed the terrain to provide residents with medication, oxygen, and other medical supplies.

“We saw all types of medical problems that are involved with living in close quarters—scabies, lice, flu, bronchitis, and diarrhea,” said Stephens. “But in spite of it all, the community really rallied together resources and endured rough situations. They were truly resilient,” she said.



CC nurses deployed to upstate New York during ice storms this winter described the region as “a battlefield.”

Similarly, LT Susan Orsega can attest to the horrific condition of the area in upstate New York that she called home for over a week. But unlike Stephens, her assignment was a stationary one, at E.J. Nobel Hospital in Alexandria Bay.

Since the storm hit, the hospital had been running well over its normal capacity. The number of patients seen in the emergency room—many treated for carbon monoxide poisoning from kerosene heaters—nearly doubled following the storm. Hospital staff faced exhaustion as they worked serial 12-hour shifts.

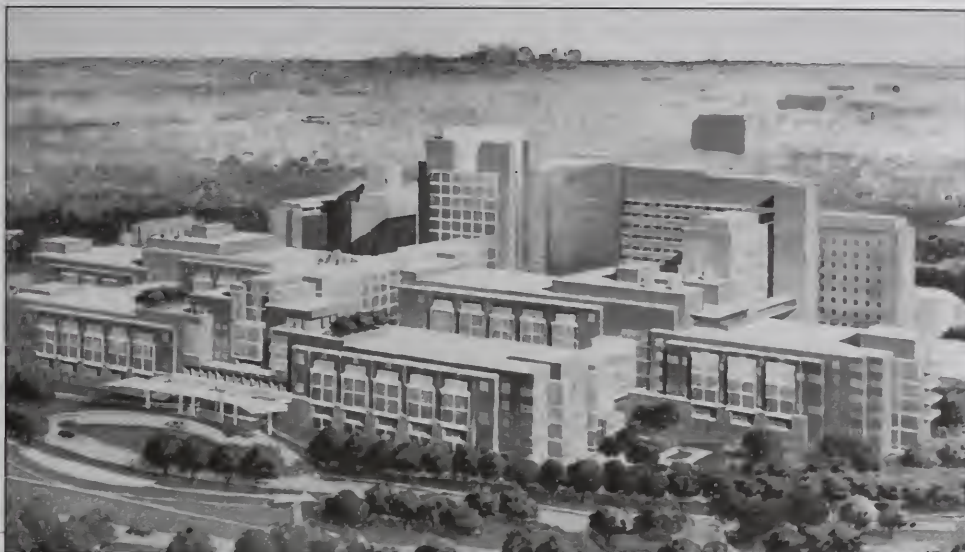
Orsega and several other Corps nurses were sent to the hospital to assist with patient care, and put in their share of long hours and little rest. Lauded by many as heroes for coming in to assist the community, Orsega instead applauds the residents and people who helped to restore the power to over 120,000 homes and businesses.

“The real heroes were the people who helped to get the power back up,” she said. Orsega marveled at the order of the town, which continued in spite of the conditions. “It was really interesting to work with a small town health-care facility and see how well organized they were and how they coped with the limited resources that they had prior to the arrival of the federal government,” she said.

“The experience was truly rewarding, both from a Public Health Service perspective and from a nursing perspective,” said Orsega. “I think all PHS staff should be trained so they can be called upon to help out when needed.”

The mission of the PHS Commissioned Corps is to provide highly trained and mobile health professionals who carry out programs to promote the health of the nation, understand and prevent disease and injury, assure safe and effective drugs and medical devices, deliver health service to federal beneficiaries, and furnish health expertise in time of war or other national or international emergencies.

—by LaTonya Kittles



Clinical Research Center project details now on the CC web

Want to keep up with plans for and progress on the new Hatfield Clinical Research Center? It's as easy as watching the web. A new site on the CC's homepage is designed to offer information on most everything you've ever wanted to know about the project. Watch for regular updates. Go to: www.cc.nih.gov/cc/crc/index.html.

NIH charities to benefit from a night at the circus in March

NIH charities will benefit from a night at the circus later this month. Join NIH friends and colleagues for premiere night at Ringling Brothers and Barnum and Bailey Circus on March 24 at 6:30 p.m. at the MCI Center.

Tickets are \$13.50, \$10.50, and \$7.50. Call 6-4600 for more information.



Rub-a-dub

The suggestions poured in for the Hospital Epidemiology Service's contest to find a new slogan to promote handwashing. Watch next month's *CCNews* for news of the winning entry.

Rehab team presents seminar on pediatric HIV

Rehabilitation Medicine's pediatric rehabilitation team and the NIH Office of Rare Diseases will co-sponsor a seminar, "Pediatric HIV: Evaluation, Medical Management, and Rehabilitation," March 19-20.

The seminar, which will be in Natcher Auditorium, is designed for physicians, nurses, dietitians, respiratory therapists, neuropsychologists, social workers, occupational therapists, physical therapists, speech-language pathologists, recreation therapists, rehabilitation counselors, and child-life specialists.

It will cover epidemiological trends, medical complications, state-of-the-art pharmacotherapies, the role of nursing in clinical research, and NIH clinical trials.

Guest faculty include Dr. Lucy Civitello, Children's National Medical Center; David Harvey, executive director of the AIDS Policy Center; Mary Williams, project director, N.E. Place; Joan McCarley, executive director, Grandma's House; and Dr. Phillip Pizzo, Children's Hospital, Boston.

No registrations will be accepted on site. Register by March 13. For more information, call Dr. Martha Bernad, 6-9019; Charles Butler, 2-0271; or Beth Solomon, 6-8831.

See the seminar's web site for details, www.cc.nih.gov/ccf/hiv_seminar.



CC quality assurance specialist Jean Harris is sharing organization skills during stint with a local agency.

CC nurse working with a local effort to design a mental health system

Jean Harris, CC nursing department quality assurance specialist, is lending her organizational expertise to a local managed-care initiative.

For the past six months, Harris has served as program coordinator for the District's Behavioral Health Managed Care Initiative, an interagency program being developed by the D.C. government.

Working at a site downtown, Harris is charged with temporarily leading the program's development to provide a model for health-care delivery to individuals with mental health and substance abuse issues. Through the initiative, the city will be able to better focus resources and enhance services for approximately 10,000 adults and children.

"This initiative will examine the mental health and substance abuse health-care delivery system as a whole," said Harris. "The wonderful thing about the program is that the concepts can apply to other patient populations, not just mental health patients."

Harris was chosen by the D.C. Commission on Mental Health

Services, not only for her former participation in the program planning process, but also for her years of nursing and organization systems design experience. She previously served as president of the D.C. Alliance for the Mentally Ill, a national education and advocacy group instrumental in passing laws and evaluating programs developed for consumers of mental health services. Harris also has experience with assessing the local mental health services through chairing the D.C. Mayor's Transition Initiative for Adult Mental Health Services. She has also been active with the NIH community, chairing both the NIH Diversity Congress Planning Committee, and the NIH Advisory Committee for Women.

Through the D.C. initiative, Harris will work closely with the Commission on Mental Health Services, Commission on Health Care Finance, the D.C. Control Board, the Mayor's Health Policy Council, as well as community-based consumers, family members, and mental health care providers.

The eternal quest: finding a place to park

As the area surrounding Building 10 continues to be prepped for construction of the Mark O. Hatfield Clinical Research Center, parking remains a major concern for CC staff.

"Although the capacity of employee parking spaces on campus has actually gone up over the last year, unfortunately, many spaces in or around Building 10 have been lost and are being replaced further away from the building," said Stella Serras-Fiotes, Office of Research Services (ORS).

As a result of the lost spaces, as well as input from a campus-wide electronic survey conducted by the ORS, numerous initiatives have been adopted to address patient, staff, and visitor concerns.

One such project was the revamping of patient and patient-visitor parking on the P-3 level. To better accommodate patients and their visitors, attendant-assisted parking was introduced on the P-3 level in December 1996. Last year, this approach was adopted for employee parking facilities at MLP-8 and lots 31B and H, and to consolidated visitor parking near the Natcher Building and Lot 4A. Through this method, attendants guide cars into empty spots, and if all spots are full, direct the employees to "stack" their cars in the aisles. The keys are secured by the attendant and drivers are given a ticket, which they must produce to claim their car at the end of the visit.

Despite initial uneasiness among NIH staff, the attendant-parking system has proved convenient for many. One concern was that parkers would have a long wait at the end of the day when they went to claim their cars, but instead many have found that they save much more time than driving around campus looking for a spot.

"Over fifty-five percent of the people in our recent survey said that they like the service and would like to see it expanded," said Fiotes. "That's a big culture change for NIH, when there was so much opposition at first."



Parking at NIH has never seemed more elusive, but there are options over the long haul of construction disruption.

Planners are also exploring Building 10 employee-garage parking issues, but doubt that much can be done to change the number of spaces. "Unfortunately, we have not been able to address the staff parking as well as the patients' because of the compounded impact of the garage repair project on the P1 and P2 levels, as well as the CRC construction in the lots north of the building," said Fiotes.

The number of spaces in lots on the front (north) side of the building is expected to remain constant, roughly through the fall of this year. A temporary lot, which provides approximately 110 spaces, has been constructed on Center Drive, east of the Convent. But as the relocation of Center Drive nears completion later this year, the remaining lots in front of Building 10 will close.

But, there are other lots available for parking, although not in areas close to the building. Transportation is available to these spots.

"At least we're at a point where

no one can say that there is no parking on the NIH campus," said Fiotes. "Even on the busiest day, there are anywhere from 150-200 spaces empty in lot 41. There is shuttle service from there to any building on campus."

Paid parking, which is available around and within the building, can also be an option for staff who lose their space after leaving for lunch or are visiting from an off-site location. "Parking is allowed in all the pay visitor parking lots for NIH employees as long as they pay," said Fiotes.

Additional options that will be explored include more direct routes for on- and off-campus shuttle buses, express bus service from more locations, a volunteer ride bank, and increases in alternative work schedules and telecommuting.

"As we get closer to the construction of the CRC, we will further review how the project affects staff in Building 10," said Fiotes.

—by LaTonya Kittles

Refinements continue to 14th floor room mock-ups

The patient-care unit mock-ups on the 14th floor continue to take form. During the current phase, room configuration and window options are being finalized. Shown are the most recent alterations to the rooms.



m a r c h

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Ethics Grand Rounds noon-1 p.m. Lipsett Amphitheater

DNR in the OR, Robert Wittes, M.D., NCI, H. Richard Alexander, M.D., NCI, and Bob Truog, M.D., Children's Hospital, Boston

Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Regulation of Apoptosis by Oncogenes and Tumor Suppressor Genes, Eileen White, Ph.D., Rutgers University, Piscataway

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Grand Rounds noon-1:30 p.m. Lipsett Amphitheater

Drugs and the Brain: A Science-Based View of Drug Abuse and Addiction, Alan Leshner, Ph.D., NIDA

Tumor Specific Translocations as Targets for Immunotherapy, Lee Helman, M.D., NCI

These rounds are part of the CenterNet broadcasts to medical schools and hospitals across the country.

Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

The Molecular Mechanism of Kinesin-Driven Motility, Ronald Vale, Ph.D., University of California, San Francisco

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Clinical Pathologic Conference noon-1 p.m. Lipsett Amphitheater

A Case of Progressive Pulmonary Infiltrates, Henry Masur, M.D., CC

Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Carbamoyl Phosphate Synthetase: A 96 Å Journey from Substrate to Product, Hazel Holden, Ph.D., University of Wisconsin, Madison

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Grand Rounds noon-1 p.m. Lipsett Amphitheater

Combined Visual and Drug Activation During PET: Implications for Augmenting Cholinergic Therapy in Alzheimer's Disease, Trey Sunderland, M.D., NIMH and Marc Mentis, M.D., NIA

Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Mammalian X Chromosome Inactivation, Rudolph Jaenisch, M.D., Massachusetts Institute of Technology, Cambridge